

RECEIVED-FPSC

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COMMISSION
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090132-TI

| SENDER. COMPLETE THIS SECTION | COMPLETE THIS SECTION AT DELIVERY |
|--|--|
| <ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | <p>A. Signature <input checked="" type="checkbox"/> Agent</p> <p><i>[Signature]</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Addressee Arie Kachler</p> <p>C. Date of Delivery 6/1</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> |
| <p>1. Article Addressed to: 090132</p> <p>Telcom.Net, Inc. 1930 Harrison Street, Suite 404 Hollywood FL 33020-7829</p> <p>ASC-09-0383 CO-TI</p> | <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> |
| <p>2. Article Number 7006 0810 0002 3487 6954 (Transfer from serial)</p> | <p>PS Form 3811, February 2 Domestic Return Receipt 102595-02-M-1540</p> |

DOCUMENT NUMBER-DATE

05495 JUN-3 8

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